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					_					
Fill in this informa	tion to identify the case:									
Debtor 1	Terry W Bubb									
Debtor 2 (Spouse, if filing)	Marion I Bubb, The Estate of									
United States Bankrup	otcy Court for the:	Western	District of	Wisconsin (State)						
Case number	1-17-13567-cjf				5					
Form 4100 Respon	or se to Notice	of Fina	l Cure	Paymo	ent	10/15				
According to Bar	kruptcy Rule 3002.1(g), the	creditor respond	s to the trustee	s's notice of fin	ial cure payment.					
Part 1: M	ortgage Information									
Name of creditor	Wisconsin Housing a	nd Economic Deve	lopment	Cou	rt claim no. (if known)	_ 4				
Last 4 digits of a	ny number you use to identi	fy the debtor's acc	count:	0092						
Property address	3650 S County Rd E									
. ,	Number Street			_						
				_						
	South Range City	WI State	Zip Code							
	Ony	Oldio	2.10 0000							
Part 2: Pr	repetition Default Pay	ments								
Check one:										
Creditor ag on the cred	rees that the debtor(s) have pitor's claim.	aid in full the amou	ınt required to c	ure the prepetiti	on default					
	agrees that the debtor(s) hav itor's claim. Creditor asserts s:	•	•							
Part 3: Po	ostpetition Mortgage	Payment								
Check one:										
	tes that the debtor(s) are currence Code, including all fees,				§ 1322(b)(5) of					
The next po	stpetition payment from the d	ebtor(s) is due on:	N/A Paid MM / DD /							
	tes that the debtor(s) are not ruptcy Code, including all fee				th § 1322(b)(5)					
Creditor ass	erts that the total amount rem	naining unpaid as o	f the date of this	s response is:						
a. Total po	stpetition ongoing payments o	lue:			(a)					

Creditor asserts that the debtor(s) are contractually obligated for the postpetition payment(s) that first became due on:

b. Total fees, charges, expenses, escrow, and costs outstanding:

c. Total. Add lines a and b.

MM / DD / YYYY

(c)

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Debtor 1	Terry W Bub	b			Case number (if kno	own) <u>1-17-13567</u> -	cjf				
	First Name	Middle Name	Last Name								
Part 4: Ite	mized Pav	ment Histor	v								
Part 4: Itemized Payment History											
					full or states in Part 3 that						
\ /			,	, ,	es, expenses, escrow, ar ounts from the date of th	,					
bankruptcy filing				ig the following and	Junis nom the date of th	С					
. , ,	Ü	·									
all paymentall fees, cos		d expenses asse	essed to the m	ortgage, and							
		ontends remain u									
The following an	nount(s) will be	due at the earlie	er of repaymer	nt in full. acceleratio	n, or maturity of the loar	n:					
_	, ,										
Deferred extension Deferred daily si		ated to re-ages of	or loan mods):		\$ \$						
Deferred (other):					\$						
Dord Fr. Sie	U										
Part 5: Sig	gn Here										
The person con proof of claim.	npleting this r	esponse must s	sign it. The re	esponse must be t	filed as a supplement t	o the creditor's					
Check the appro	priate box:										
	,										
☐ I am the creditor.											
■ I am the o	creditor's authoriz	zed agent.									
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.											
_ ,	,										
Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.											
		,,, ,,,, p. 00. 0. 0			u .						
x /s/ Matthew	/ L Comella				Date	8/15/2022					
Signature						0, 10, 2022					
Print	Matthew L.	Comella			Title	Attorney for Credito	r				
111110	First Name	Middle Nam	ne Las	st Name		Attorney for Orealto	<u> </u>				
Compony	Cadilia Ma	ady & Ciraalli D	<u></u>								
Company	Codilis, Mod	ody & Circelli, P.	O		<u> </u>						
If different from	the notice ac	ldress listed on	the proof of	claim to which this	s response applies:						
Address	15W030 No	orth Frontage Ro	ad, Suite 200		<u></u>						
	Number	Street									
	Burr Ridge		IL	60527	<u></u>						
	City		State	ZIP Code							
						bkpleadingsWEST@	Dwi cele				
Contact phone	(414) 775-7	700				gal.com	5 W1.0310				
			_			•					
							File No. 50-17-02308				

1-17-13567-cjf

CERTIFICATE OF SERVICE

The undersigned, an attorney, hereby certifies that I have served a copy of this Notice upon the parties listed below, as to the Trustee and Debtor's attorney via electronic notice on August 15, 2022 and as to the debtor by causing same to be mailed in a properly addressed envelope, postage prepaid, from 7140 Monroe Street, Willowbrook, IL 60527 before the hour of 5:00 PM on August 16, 2022.

Mark Harring, Chapter 13 Trustee, 131 W. Wilson Street, Suite 1000, Madison, WI 53703-3260 by electronic notice through ECF

Terry W Bubb, Marion I Bubb, The Estate of, Debtor(s), P.O. Box 35, South Range, WI 54874 John F. Hedtke, Attorney for Debtor(s), 1217 East First Street, Duluth, MN 55805 by electronic notice through ECF

Office of U.S. Trustee, 780 Regent Street, Suite 304, Madison, WI 53715 by electronic notice through ECF

/s/ Matthew L. Comella

Shawn R. Hillmann, WI Bar No. 1037005 Rachael A. Stokas, MO Bar No. 61282 Matthew Comella, WI Bar No. 1096303 Peter C. Bastianen, IL Bar No. 6244346 Joel P. Fonferko, IL Bar No. 6276490 Codilis, Moody & Circelli, P.C. 15W030 North Frontage Road, Suite 200 Burr Ridge, IL 60527 (414) 775-7700) File No. 50-17-02308

NOTE: This law firm is a debt collector.